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Bib Data Sheet

CONFIRMATION NO. 6983

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|--|---|-----------------------------------|---|---|------------------------------------|
| SERIAL NUMBER 09/941,243 | FILING DATE 08/28/2001 RULE | CLASS 709 | GROUP ART UNIT 2154 | ATTORNEY DOCKET NO. P0423 | |
| APPLICANTS Geoffrey B. Rhoads, West Linn, OR; ** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 09/464,307 12/15/1999 PAT 6,286,036 WHICH IS A DIV OF 09/130,624 08/08/1998 PAT 6,324,573 WHICH IS A CON OF 08/508,083 07/27/1995 PAT 5,841,978 ** FOREIGN APPLICATIONS ***** <i>yes w.</i> <i>none w.</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/02/2001 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowed <i>John</i> Verified and Acknowledged <i>John</i> Examiner's Signature Initials | | STATE OR COUNTRY OR | SHEETS DRAWING 18 | TOTAL CLAIMS 14 | INDEPENDENT CLAIMS 2 |
| ADDRESS 23735 | | | | | |
| TITLE Internet linking from audio and image content | | | | | |
| FILING FEE RECEIVED 870 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |